

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

IMPROVED DECORATIVE WOOD COMPOSITE  
PRODUCTS AND ADHESIVE COMPOSITIONS

Attorney Docket Number::

005242.00103

Request for Early Publication?::

NO

Request for Non-Publication?::

NO

Suggested Drawing Figure::

Total Drawing Sheets::

1

Small Entity?::

NO

Latin name::

Variety denomination name::

Petition included?::

NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

NO

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: China  
Status:: Full Capacity  
Given Name:: Jianwen  
Middle Name::  
Family Name:: NI  
Name Suffix::  
City of Residence:: Decatur  
State or Province of Residence:: Georgia  
Country of Residence:: United States of America  
Street of mailing address:: 466 Crested View Drive  
  
City of mailing address:: Decatur  
State or Province of mailing address:: Georgia  
Country of mailing address:: United States of America  
Postal or Zip Code of mailing address:: 30052

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States of America  
Status:: Full Capacity  
Given Name:: Charles  
Middle Name:: R.  
Family Name:: Davis  
Name Suffix::  
City of Residence:: Conyers  
State or Province of Residence:: Georgia  
Country of Residence:: United States of America  
Street of mailing address:: 170 Lanella Parkway  
  
City of mailing address:: Conyers  
State or Province of mailing address:: Georgia

Country of mailing address:: United States of America

Postal or Zip Code of mailing address:: 30013

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 22907

### **Representative Information**

Representative Customer Number:: 22907

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

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### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::